

CLAIMS ONLY							Application Number 10783612		Filing Date			
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51					
2		1					52					
3							53					
4		1					54					
5							55					
6		1					56					
7	1						57					
8							58					
9		1					59					
10							60					
11		1					61					
12							62					
13		1					63					
14	1						64					
15							65					
16		1					66					
17							67					
18		1					68					
19							69					
20		1					70					
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23		1					73					
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43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	4						Total Indep					
Total Depend	20						Total Depend					
Total Claims	24						Total Claims					